FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

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Washington, DC

FORM D

OMB APPROVAL
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NOTICE OF SALE OF SECURITIES
OC PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY								
Prefix	Serial							
DATE RECEIVED								
	1							

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Offering of Limited Partnership Interest Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)) ULOE
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	0 0 000
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer]
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	08049264
Waypoint Partners LP	00049204
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
853 Camino Del Mar, Suite 202, Del Mar, CA 92014	858-755-2021
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	Same
<u>Same</u>	Same
Brief Description of Business	
Investments	DDOOF
Type of Business Organization	(please specify): MAY 0 5 2008
corporation Imited partnership, already formed other ((please specify):
business trust limited partnership, to be formed	MAY U 5 2008
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for Stat	DE
77d(6). When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering	g. A notice is deemed filed with the U.S. Securities
and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given which it is due, on the date it was mailed by United States registered or certified mail to that address.	below of, if received at that address after the date of
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	0549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manual photocopies of the manually signed copy or bear typed or printed signatures.	
Information Required. A new filing must contain all information requested. Amendments need only rep thereto, the information requested in Part C, and any material changes from the information previously support be filed with the SEC.	ort the name of the issuer and offering, any changes plied in Parts A and B. Part E and the Appendix need
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim f accompany this form. This notice shall be filed in the appropriate states in accordance with state law this notice and must be completed.	Securities Administrator in each state where saies for the exemption, a fee in the proper amount shall
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the federal eappropriate federal notice will not result in a loss of an available state exemption unlifiling of a federal notice.	exemption. Conversely, failure to file the less such exemption is predictated on the

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☐ Director General and/or Executive Officer Beneficial Owner Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Sebago Holdings LLC Business or Residence Address (Number and Street, City, State, Zip Code) 853 Camino Del Mar, Suite 202, Del Mar, CA 92014 General and/or Executive Officer Promoter Beneficial Owner **✓** Director П Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Baratta, David A Business or Residence Address (Number and Street, City, State. Zip Code) 853 Camino Del Mar, Suite 202, Del Mar, CA 92014 General and/or Promoter ☐ Beneficial Owner Executive Officer Director Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer General and/or Beneficial Owner Director Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Director General and/or Beneficial Owner Executive Officer Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or ☐ Beneficial Owner ☐ Executive Officer Director Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business of Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

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Γ-					B. IN	FORMATION	ON ABOUT	OFFERIN	G				·
<u> </u>			or does the		14 - 11	1 4	andited in	vactore in	this afferir	va?		Yes	No ⊠
I.				Ancu	er also in	Annendix	Column 2	if filing u	nder ULOI	3.			
2.	What is	the minimu	ım investm	ent that wi	II be accep	ted from a	ny individi	ıal?				<u>\$_500,</u>	00.000
	What is the minimum investment that will be accepted from any individual? Does the offering permit joint ownership of a single unit?									1 62	No □		
3.													Ŀ
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. 1 Name (Last name first, if individual)												
	II Name (I		irst, if indi	vidual)									
			Address (N	umber and	Street, Ci	ty, State, Z	ip Code)						
Са	pital Inves	stment Par	tners, 401	LaSalle St							······································		
Na	me of Ass	ociated Bro	oker or Dea	aler									
Sta	ites in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	urchasers						
	(Check	"All States	or check	individual	States)							Z All	States
	AL IL MT RI	AK IN NE SC	AZ. IA NV SD	AR (KS) (NH) (TN)	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Fu	il Name (Last name	first, if indi	ividual)						•			
Bu	isiness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)	_					
N	ame of As	sociated Br	oker or De	aler									
St			Listed Has										1.5
	(Check	"All States	or check	individual	States)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			••••			. [] Аі	1 States
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
F	ıll Name (Last name	first, if ind	ividual)			 -				<u>-</u>		
B	usiness or	Residence	Address (Number an	d Street, C	City, State,	Zip Code)	***	<u> </u>				
N	ame of As	sociated B	roker or De	ealer								•	
Si			n Listed Ha						<u>,</u>	<u> </u>			
	(Check	"All State	s" or check	individua	States)					•••••••		🗌 A	II States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	LA NM UT	ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

HE GENERAL PARTNER MAY 3 of 9

IN ITS DISCRETION WAIVE OR REDUCE THIS AMOUNT.

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

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1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	s
	Equity		
	Common Preferred		<u></u> -
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		
	Other (Specify)	400,000,000.00	9,563,382.00
	Total	400,000,000.00	s 9,563,382.00
		<u></u>	-
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	14	\$ 9,563,382.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)	·	\$ <u>9,563,382.00</u>
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	:	
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	:	
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$_1,000.00
	Legal Fees		\$_30,000.00
	Accounting Fees		\$ 3,000.00
	Engineering Fees		s
	Sales Commissions (specify finders' fees separately)		\$ 3,600.00
	Other Expenses (identify) Blue Sky Filing Fees		\$_2,080.00
	Total		\$_39,680.00
	- V		

	C. OFFERING PRICE, NUME	BER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
	b. Enter the difference between the aggregate offeri and total expenses furnished in response to Part C—oproceeds to the issuer.	ng price given in response to Part C — Question Question 4.a. This difference is the "adjusted gros	\$	s
5.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate an the payments listed must equal the adjusted gros	d	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		. 🗸 \$_0.00	<u> 2</u> \$ <u>0.00</u>
	Purchase of real estate			<u> </u>
	Purchase, rental or leasing and installation of mac and equipment	hinery		Z \$_0.00_
	Construction or leasing of plant buildings and fac	ilities	. Z \$ 0.00	\$ 0.00
	Acquisition of other businesses (including the val offering that may be used in exchange for the asse issuer pursuant to a merger)	ts or securities of another	. Ø \$_0.00_	_ [] \$_0.00
	Repayment of indebtedness		. 🔽 \$ <u>_0.00</u>	<u> </u>
	Working capital		· 🗹 \$_0.00	\$ 399,960,320.00
	Other (specify):		\$_0.00	\$ 0.00
			. 🗾 S	<u> 2</u> \$_0.00
	Column Totals			\$ 399,960,320.00
	Total Payments Listed (column totals added)		_	99,960,320.00
Г		D. FEDERAL SIGNATURE		
sign	sissuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	nish to the U.S. Securities and Exchange Comm	iission, upon writt	ule 505, the following en request of its staff,
- Issi	ner (Print or Type)	Signature /	Date	
	aypoint Partners LP	1 marats	04/09/2008	
	ne of Signer (Print or Type)	Title Signer (Print or Type)		
Ву:	David A. Baratta its Managing Member	General Partner		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
l.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No K
	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is f D (17 CFR, 239,500) at such times as required by state law.	iled a no	tice on Forn
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, informat issuer to offerees.	ion furr	ished by th
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entimited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer clai of this exemption has the burden of establishing that these conditions have been satisfied.	itled to ming the	the Uniforn e availabilit
	ter has read this notification and knows the contents to be true and has duly caused this notice to be signed on its beha thorized person.	lf by the	undersigned
ssuer (Print or Type) Signature Date		
Navpoi	int Partners LP 04/09/2008		

General Partner

Name (Print or Type)

By: David A. Baratta its Managing Member

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 5 2 3 1 Disqualification under State ULOE Type of security (if yes, attach Intend to sell and aggregate explanation of offering price Type of investor and to non-accredited waiver granted) amount purchased in State offered in state investors in State (Part C-Item 2) (Part E-Item 1) (Part C-Item 1) (Part B-Item 1) Number of Number of Non-Accredited Accredited Yes No Investors Amount Investors Amount Yes No State AL $\mathbf{A}\mathbf{K}$ ΑZ AR × \$0.00 7 400,000,000 \$6,016,976.0 $\mathsf{C}\mathsf{A}$ X CO CT DE DC FL GA HI lD \$500,000.01 0 \$0.00 X 1 400,000,000 lL IN IΑ KS KY LA \$0.00 X \$796,571.00 400,000,000 1 ME X MD ΜA ΜI MN MS

				APP	ENDIX				
1	to non-ac	to sell	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
MT									
NE									
NV									
NH		×	400,000,000	1	\$35,239.00	0			×
NJ		×	400,000,000	2	\$333,918.00	0			×
NM						<u></u>	·		
NY		×	400,000,000	1	\$707,033.00	0			×
NC		Í							
ND									
он		1							
ок									
OR		×	400,000,000	0		0			×
PA									
RI									
SC									
SD									
TN		×	400,000,000	1	\$156,708.00	0			×
TX									
UT									
VT									
VA									
WA									
WV									
WI									

				APP	ENDIX				
ı	Intend to non-a investor	2 I to sell accredited rs in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			under St (if yes explan waiver	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									

